ADE LOAN LIBRARY - LOAN REQUEST FORM

DATE OF REQUEST

CONTACT INFORMATION

Borrower Name

School District Special Ed Director/ Administrator

School

Mailing address (No PO Box, must be street address)

Street City County

State Zip code

Email

Day time Phone Number Ext Fax

Attention (if different than above)

ITEM(S) REQUESTED

| 1. | Item Number | Name/Description |
|----|-------------|------------------|
| 2. | Item Number | Name/Description |
| 3. | Item Number | Name/Description |
| 4. | Item Number | Name/Description |
| 5. | Item Number | Name/Description |

COMMENTS

| PL | JRPOSE OF LOAN (select primary reason) Consideration/Assessment Classroom implementation Serve as loaner during device repair or while waiting for funding Provide an accommodation on a short-term basis Professional development |
|----|--|
| SC | CHOOL ENVIRONMENT |
| | Preschool |
| | K-8 |
| | Middle / Junior High School |
| | High School |
| | Alternative School |
| | Secure Care |

| BORROWER INFORMATION |
|---|
| ADE AT Specialist |
| ☐ Administrator |
| Audiology |
| Curriculum Specialist |
| Occupational Therapy |
| ☐ Paraprofessional |
| Parent |
| ☐ Psychologist |
| ☐ Physical Therapy |
| General Ed Teacher |
| SLP/ Speech Therapist |
| ☐ Special Ed Teacher |
| ☐ Technology Specialist |
| 504 Coordinator |
| TELL US HOW YOU HEARD ABOUT THE LIBRARY |
| ☐ Previously borrowed |
| ADE AT Specialist |
| ADE Website |
| Administrator |
| AzTAP Website |
| Colleague |
| Training or conference |
| Vendor |
| Other |
| |

TERMS OF AGREEMENT

In borrowing from the ADE Lending Library, I:

| | Will obey software and other copyright laws. I will not make copies of borrowed books, videos, software, etc. and will remove borrowed software |
|---|---|
| | programs that were temporarily installed on any of our computer hard drives prior to returning original software to Loan Library. Will follow all stated procedures for requesting equipment from the loan library and will immediately notify Janelle Bauerle at 928-523-6759 or at Janelle.bauerle@nau.edu if equipment malfunctions or ceases to operate. No |
| | attempts to repair malfunctioning equipment will be made without authorization. Understand that my school/ district will accept responsibility for the cost of repairing or replacing equipment damaged as a result of loss, theft, abuse, |
| | neglect or carelessness. Assume responsibility for returning equipment ON TIME. Equipment MUST be returned using the prepaid shipped label in order to efficiently track late, lost or damaged equipment. |
| | Understand that my loan library privileges will be suspended or revoked if I do not abide by these requirements. |
| | Will provide feedback on the use of the library using the ADE supplied form. |
| ✓ | Email completed form to Janelle Bauerle at <u>Janelle.Bauerle@nau.edu</u> or fax to 928-523 4953 |